

RECEIVED PTO 03 JUN 2005

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/537567

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4	1					
5		1				
6		1				
7		5				
8		5				
9		5				
10		5				
11		5				
12	1					
13		1				
14		1				
15		3				
16	1					
17		1				
18	1					
19		1				
20		1				
21		3				
22		3				
23	1					
24		1				
25		1				
26		3				
27	1					
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32		1				
33		3				
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49						
50						
TOTAL IND.	8					
TOTAL DEP.	59					
TOTAL CLAIMS	67					

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						